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Provide the Hospital Owner and Year of Report per Section 130061(e)

| Facility Number: | 12363 | |
|---------------------|--------------------------------------|--|
| Facility Name: | Scripps Memorial Hospital - La Jolla | |
| Address: | 9888 Genesee Avenue | |
| City: | La Jolla | |
| | | |
| Hospital Owner/Lic | censee: Scripps Health | |
| Year of Rep | porting: 2010 | |
| Contact 1 e-mail Ac | ddress: | |
| Contact 2 e-mail Ac | ddress: | |
| Contact 3 e-mail Ad | ddress:: | |
| Name of Sub | bmitter: Bruce Rainey | |
| Submission | n Date: 1/19/2011 3:57:14 PM | |

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

| Bldg. No. | Building Name | Alternate Building Address | Building Resolution | Final SPC Rating If Required | Extension Date | Anticipated Completion Date |
|--------------|------------------------------|----------------------------|------------------------|---------------------------------|-------------------|-----------------------------|
| 01-3-4 | Building 1-3-4 | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 12/31/2010 |
| 02 | West Tower | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 12/31/2010 |
| 05 | Transition Tower (& 5A) | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 04/11/2012 |
| 06 | East Tower | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 12/31/2010 |
| 07 | Building 7 | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 12/31/2010 |
| 08 | Service Building (8, 8A, 8B) | 9888 Genesee Avenue | Retrofit | SPC2 | 01/01/2013 | 12/31/2010 |

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For each building which is planned for retrofitting or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

| Building No: 01-3-4 | Building 1-3-4 | Retrofit/Replacement Project: | es-Submitted |
|---|---|---|--------------------------|
| Facility Project Sub Number Number Num | Scope | Date Plan Approved Proj. Start Proj. Complete in Date Date Date | ed Status CEQA Review |
| 12363 HL091950 | 0 BUILDING 1-3-4 INCIDENTAL STRUCTURAL UPGRADE | 09/08/2009 09/15/2010 12/31/2010 | OPEN No |
| Building No: 02 | West Tower | Retrofit/Replacement Y | 'es-Submitted |
| Facility Project Sub Number Number Num | Scope | Date Plan Approved Proj. Start Proj. Complete in Date Date Date | ed Status CEQA Review |
| 12363 HL091952 | 0 BUILDING 2-7 INCIDENTAL STRUCTURAL UPGRADE | 09/08/2009 08/25/2010 09/15/2010 12/31/2010 | OPEN No |
| Building No: 05 | Transition Tower (& 5A) | Retrofit/Replacement Y | 'es-Submitted |
| Facility Project Sub Number Number Num | Scope | Date Plan Approved Proj. Start Proj. Complete in Date Date Date | ed Status CEQA Review |
| 40000 111 004054 | | | |
| 12363 HL091954 | BUILDING 5 INCIDENTAL STRUCTURAL UPGRADE | 09/08/2009 03/29/2011 04/11/2012 | OPEN No |
| Building No: 06 | | | OPEN No 'es-Submitted |
| | UPGRADE | Retrofit/Replacement Y | 'es-Submitted |

| Report Year: 2010 12363 Scripps Memorial Hos | Spital - La Jolla Page:4 of 90 |
|--|--|
| Building No: 07 Building 7 | Retrofit/Replacement Yes-Submitted Project: |
| Facility Project Sub Scope Number Number Num | Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review |
| 12363 HL091952 0 BUILDING 2-7 INCIDENTAL STRUCT UPGRADE | TURAL 09/08/2009 08/25/2010 09/15/2010 12/31/2010 OPEN No |
| Building No: 08 Service Building (8, 8A, 8B) | Retrofit/Replacement Yes-Submitted Project: |
| Facility Project Sub Scope Number Number Num | Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review |
| 12363 IL080640 0 BUILDING 8-8A SPC-2 STRUCTURA UPGRADES | L 12/26/2008 06/01/2010 09/15/2010 12/31/2010 OPEN No |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 01 | -3-4 Buildi | ng Name: Building 1-3-4 | | | | |
|----------------------------|--------------------------|--------------------------|---------------------------------|-----------------------------|--|--|
| Type of Service Prov | Type of Service Provided | | | | | |
| Nursing | Inpatient Beds | 0 Inpatient 0 Days | X Surgical | Obstetrical Recovery | | |
| IntensiveCare | Inpatient Beds | 0 Inpatient Days 0 | X Anesthesia | Newborn/ WellBaby | | |
| X Pediatric/Adol escent | Inpatient Beds | 14 Inpatient Days 3463 | Clinical Lab | Emergency | | |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | X Radiological/ Imaging | Nuclear Medicine | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 Inpatient Days 0 | Pharmaceutical X Dietetic | X Rehabilitation Therapy | | |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | Administration | Renal Dialysis | | |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 | Support Services X Obstetrical | X Outpatient Surgery | | |
| | | Total Beds this Building | Cesarean/Deliv | Central Plant | | |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 02 | Buildi | ng Name: West Tower | | |
|------------------------------|-------------------|--------------------------|--------------------------------|------------------------|
| Type of Service Prov | <u>rided</u> | | | |
| X Nursing | Inpatient Beds | 145 Inpatient 31486 Days | Surgical | X Obstetrical Recovery |
| X IntensiveCare | Inpatient Beds | 11 Inpatient Days 924 | Anesthesia | X Newborn/ WellBaby |
| Pediatric/Adol escent | Inpatient Beds | 0 Inpatient Days 0 | X Clinical Lab | Emergency |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | Radiological/ Imaging | Nuclear Medicine |
| X Obstetrical Ante/Postprtum | Inpatient Beds | 30 Inpatient Days 10738 | Pharmaceutical Dietetic | Rehabilitation Therapy |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | Administration | Renal Dialysis |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 | X Support Services Obstetrical | Outpatient Surgery |
| | | Total Beds this Building | Cesarean/Deliv | Central Plant |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 05 | Buildi | ng Name: Transition Tower (& 5A) | | | | | |
|----------------------------|--------------------------|------------------------------------|---|------------------------|--|--|--|
| Type of Service Prov | Type of Service Provided | | | | | | |
| Nursing | Inpatient Beds | 0 Inpatient 0 Days | Surgical | Obstetrical Recovery | | | |
| IntensiveCare | Inpatient Beds | 0 Inpatient Days 0 | Anesthesia | Newborn/ WellBaby | | | |
| Pediatric/Adol escent | Inpatient Beds | 0 Inpatient Days 0 | Clinical Lab | Emergency | | | |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | Radiological/ Imaging | Nuclear Medicine | | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 Inpatient Days 0 | Pharmaceutical Dietetic | Rehabilitation Therapy | | | |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | Administration | Renal Dialysis | | | |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 Total Beds this | X Support Services Obstetrical Cesarean/Deliv | Outpatient Surgery | | | |
| | | Building | 200410411,20114 | Central Plant | | | |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 06 | Buildiı | ng Name: East Tower | | | | |
|------------------------------|--------------------------|---------------------------------------|--|-----------------------------|--|--|
| Type of Service Prov | Type of Service Provided | | | | | |
| X Nursing | Inpatient Beds | 87 Inpatient 15852 Days | Surgical | Obstetrical Recovery | | |
| IntensiveCare | Inpatient Beds | 0 Inpatient Days 0 | Anesthesia | Newborn/ WellBaby | | |
| Pediatric/Adol escent | Inpatient Beds | 0 Inpatient Days 0 | Clinical Lab | Emergency | | |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | Radiological/ Imaging | X Nuclear Medicine | | |
| X Obstetrical Ante/Postprtum | Inpatient Beds | 0 Inpatient Days 0 | X Pharmaceutical Dietetic | X Rehabilitation Therapy | | |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | X Administration | Renal Dialysis | | |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 Total Beds this 87 | X Support Services Obstetrical Cesarean/Deliv | Outpatient Surgery | | |
| | | Total Beds this Building | Cesarean/Deliv | Central Plant | | |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 07 | Buildi | ng Name: Building 7 | | | | |
|----------------------------|--------------------------|-------------------------------------|---|---------------------------|--|--|
| Type of Service Prov | Type of Service Provided | | | | | |
| Nursing | Inpatient Beds | 0 Inpatient 0 Days | Surgical | Obstetrical Recovery | | |
| IntensiveCare | Inpatient Beds | 0 Inpatient Days 0 | Anesthesia | Newborn/ WellBaby | | |
| Pediatric/Adol escent | Inpatient Beds | 0 Inpatient Days 0 | X Clinical Lab | Emergency | | |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | Radiological/ Imaging | Nuclear Medicine | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 Inpatient Days 0 | Pharmaceutical Dietetic | Rehabilitation Therapy | | |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | Administration | Renal Dialysis | | |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 Total Beds this | X Support Services Obstetrical Cesarean/Deliv | Outpatient Surgery | | |
| | | Building | OESAICAII/DEIIV | Central Plant | | |

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

| Building Number: 08 | Buildi | ng Name: Service Building (8, 8A, 8B |) | |
|----------------------------|-------------------|--------------------------------------|-------------------------------|---------------------------|
| Type of Service Prov | <u>rided</u> | | | |
| Nursing | Inpatient Beds | 0 Inpatient 0 Days | Surgical | Obstetrical Recovery |
| IntensiveCare | Inpatient Beds | 0 Inpatient Days 0 | Anesthesia | Newborn/ WellBaby |
| Pediatric/Adol escent | Inpatient Beds | 0 Inpatient Days 0 | Clinical Lab | Emergency |
| Psychiatric Nursing | Inpatient Beds | 0 Inpatient Days 0 | Radiological/ Imaging | Nuclear Medicine |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 Inpatient Days 0 | Pharmaceutical Dietetic | Rehabilitation Therapy |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | Administration | Renal Dialysis |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 | Support Services Obstetrical | Outpatient Surgery |
| | | Total Beds this Building | Cesarean/Deliv | X Central Plant |

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| Building Number: | 01-3-4 Build | ing Name: | Building 1-3-4 | | |
|------------------------|---------------------|---------------------------|---------------------|---|--|
| Medical / Surgical (Ir | nclude GYN) | Acute Respira | tory Care | Acute Psychiatric | |
| | npatient 0 Days | Inpatient Bed | O Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse No | ewborn / GYN) | Burn | | Skilled Nursing | |
| | npatient 0 Days | Inpatient Bed | O Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nursery | Newborn | Intermediate Card | |
| | npatient 0 Days | Inpatient 14 | Inpatient 3463 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / developn Disabled | nent |
| | npatient 0 Days | Inpatient C Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| | npatient 0 | Inpatient C | Inpatient 0 Days | 14 | 14 |

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| Building Number: | 02 | Building Name: Wes | t Tower | | |
|----------------------|--------------------------|-------------------------------|---------------------|---|--|
| Medical / Surgical (| Include GYN) | Acute Respiratory | Care | Acute Psychiatric | |
| Inpatient 145 Bed | Inpatient 3498 Days 6 | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse I | Newborn / GYN) | Burn | | Skilled Nursing | |
| Inpatient 30 Bed | Inpatient 7238 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / developr Disabled | ment |
| Inpatient 11 Bed | Inpatient 924 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 186 | 186 |

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| Building Number: | 05 | Building Name: | ransition Tower (& 5A) | | | |
|----------------------------------|---------------------|-----------------------------|------------------------|---|--|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Perinatal (excluse | Newborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care I Nursery | Newborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | | Int. Care / development Disabled | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 | |

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| Building Number: | 06 | Building Name: | East Tower | | | |
|----------------------|--------------------------|---------------------------|--------------------|---|--|--|
| Medical / Surgical (| Include GYN) | Acute Respira | atory Care | Acute Psychiatric | | |
| Inpatient 72 Bed | Inpatient 1311 Days 9 | Inpatient Bed | 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Perinatal (excluse N | Newborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 15 Bed | Inpatient 2733 Days | Inpatient Bed | 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care Nursery | Newborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient Bed | 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | | Int. Care / development Disabled | |
| | Inpatient 0 Days | Inpatient Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient Bed | 0 Inpatient 0 Days | 87 | 87 | |

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| Building Number: | 07 | Building Name: Build | ding 7 | | | |
|----------------------------------|---------------------|-------------------------------|---------------------|---|--|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Perinatal (excluse | Newborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | Int. Care / developn Disabled | nent | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 | |

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| Building Number: 08 | Building Name: Servi | ce Building (8, 8A, 8B) | | |
|-----------------------------------|-------------------------------|-------------------------|---|--|
| Medical / Surgical (Include GYN) | Acute Respiratory | Care | Acute Psychiatric | |
| Inpatient 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | Burn | | Skilled Nursing | |
| Inpatient 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | intensive Care New Nursery | vborn | Intermediate Card | |
| Inpatient 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | Rehabilitation Center | | Int. Care / developr Disabled | nent |
| Inpatient 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 |

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

| Building Number | Building Name | Building to be Removed |
|--------------------|------------------------------|------------------------|
| 01-3-4 | Building 1-3-4 | |
| 01A | Building 1-A | <u> </u> |
| 02 | West Tower | |
| 05 | Transition Tower (& 5A) | |
| 06 | East Tower | |
| 06A | Building 6A | X |
| 07 | Building 7 | |
| 08 | Service Building (8, 8A, 8B) | |
| 09 | Co-Generation Plant | X |
| 10 | Building 10 | X |
| 10A | Building 10A | <u> </u> |
| 11 | Emergency Expansion | <u> </u> |
| 12 | Dining Area Addition | <u> </u> |
| 13 | Mericos Building | X |
| 13A | Outpatient Waiting Room | X |
| | | |

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|--------------|------|-------|--------------------------------------|----------|---------------|
|--------------|------|-------|--------------------------------------|----------|---------------|

List ALL proposed new buildings to be constructd at this or another site.

| Building Number | Building Name | New Site | |
|--------------------|---------------|-------------|--|
| N_1 | 26 - Tower 1 | | |
| N_2 | 27 - Tower 2 | | |
| N_3 | 28 - Tower 3 | | |

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:19 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 1-A 2008 01A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:20 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 1-A 2009 01A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:21 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 1-A 2010 01A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:22 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 6A 2008 06A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

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0

Total Beds this

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:23 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 6A 2009 06A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:24 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 6A 2010 06A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:25 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Co-Generation Plant 2008 09 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:26 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Co-Generation Plant 2009 09 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:27 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Co-Generation Plant 2010 09 Year of Building Building Information: Number: Name: 10/10/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:28 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10 2008 10 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare 30 Inpatient Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 30

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:29 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10 2009 10 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare 30 Inpatient Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 30

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:30 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10 2010 10 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare 30 Inpatient Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 30

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:31 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10A 2008 10A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:32 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10A 2009 10A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:33 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Building 10A 2010 10A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:34 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) **Emergency Expansion** 2008 111 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:35 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) **Emergency Expansion** 2009 111 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:36 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) **Emergency Expansion** 2010 111 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:37 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Dining Area Addition 2008 12 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:38 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Dining Area Addition 2009 12 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:39 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Dining Area Addition 2010 12 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:40 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Mericos Building 2008 13 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:41 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Mericos Building 2009 13 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:42 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Mericos Building 2010 13 Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:43 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Outpatient Waiting Room 2008 13A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:44 of 90 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Outpatient Waiting Room 2009 13A Year of Building Building Information: Number: Name: 09/28/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

| Report Year: | 2010 | 12363 | Scripps Memorial Hospital - La Jolla | L | ∟a Jolla | Page:45 of 90 |
|--------------|------|-------|--------------------------------------|---|----------|---------------|
|--------------|------|-------|--------------------------------------|---|----------|---------------|

| Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) | | | | | | | |
|---|-----------------------------|------------|--------------------------|-------------------------------|---------------------------|--|--|
| Building 13A Number: | Building Name: | Outpatient | Waiting Room | Year of Information: | 2010 | | |
| | | | | Information Current As Of: | 09/28/2010 | | |
| Type of Services Provided | | | | | | | |
| Nursing | Inpatient Beds | 0 | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| IntensiveCare | Inpatient Beds | 0 | Anesthesia | | | | |
| Pediatric/Adol escent | Inpatient Beds | 0 | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| Psychiatric Nursing | Inpatient Beds | 0 | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 | Pharmaceutical | Emergency | Central Plant | | |
| Intermediate Care | Inpatient Beds | 0 | Dietetic | Nuclear Medicine | X Support Services | | |
| Skilled Nursing | Inpatient Beds | 0 | Administration | | | | |
| | Total Beds this Building | 0 | | | | | |

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla

La Jolla

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Report whether the general acute care services and beds will be relocated to a new or retrofittrd building and any corresponding building sites or project numbers per Section 130061(c)(2)(E)

| - |
|---|
| Building Name: Building 1-A Number: |
| Will general acutr care services and beds will be relocated to a new or retrofittrd building? |
| |
| Surgical Relocated to new building |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count |
| N_1-26 - Tower 1 |
| |
| N_2-27 - Tower 2 |
| Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed |
| Status |
| Number Num in Date Date Date |
| |
| 12363 IL101240 0 SCRIPPS CARDIOVASCULAR INSTITUTE 06/08/2010 07/14/2011 11/14/2014 OPEN |
| |
| Building 01A Building Name: Building 1-A |
| Number: |
| Will general acutr care services and beds will be relocated to a new or retrofittrd building? |
| Radiological/Imaging Relocated to new building |
| |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count |
| N_1-26 - Tower 1 |
| N 2-27 - Tower 2 |
| |
| |

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:47 of 90 06A Building 6A **Building Name:** Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Surgical **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N 1-26 - Tower 1 Project Date Plan Approved Proj. Start Proj. Completed Facility Sub Scope Status Number Number Num Date Date Date IL101240 12363 0 SCRIPPS CARDIOVASCULAR INSTITUTE 06/08/2010 07/11/2011 11/14/2014 OPEN 06A **Building Name:** Building 6A Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Administration Relocated to other building **New Building** Bed Count RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N 2-27 - Tower 2 06A Building 6A Building **Building Name:** Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Support Services Relocated to new building **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_2-27 - Tower 2

| Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:48 of 90 |
|--|
| Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? CentralPlant Removed from hospital services |
| Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Intensive Care Relocated to new building |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count |
| N_2-27 - Tower 2 30 |
| Building Number: Building Name: Building 10 Will general acutr care services and beds will be relocated to a new or retrofittrd building? |
| |
| Support Services Relocated to new building |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count |
| N_2-27 - Tower 2 |

| Report Year: 2 | 010 12363 Sci | ripps Memorial Hospital - La | a Jolla | La Jolla | Page:49 of 90 | | | |
|--|---|------------------------------|----------------------|--------------------------|---------------|--|--|--|
| _ | e services and beds wi | ll be relocated to a new or | retrofittrd building | g? | | | | |
| Intensive Care Relocated to new building | | | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Building | Bed Count | | | |
| N_2-27 - Tower 2 | 30 | | | | | | | |
| | | | | | | | | |
| Building 10, Number: | | | the fitted by ildin | -2 | | | | |
| Will general acutr card | Will general acutr care services and beds will be relocated to a new or retrofittrd building? | | | | | | | |
| Support Services | Relocated to new bu | ilding | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Building | Bed Count | | | |
| N_2-27 - Tower 2 | | | | | | | | |
| | | | | | | | | |
| Building 11 Number: | Building Na | ame: Emergency Expans | sion | | | | | |
| Will general acutr care | e services and beds wi | Il be relocated to a new or | retrofittrd building | g? | | | | |
| Administration | Relocated to new bu | ilding | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Building | Bed Count | | | |
| N_2-27 - Tower 2 | | | | | | | | |
| | | | | | | | | |

| Report Year: | 2010 12363 | Scripps Memorial Hospital - L | a Jolla | La Jolla | Page:50 of 90 | | | | |
|--------------------------------------|-------------------------------------|----------------------------------|----------------------|-----------------------|----------------|--|--|--|--|
| Building Number: Emergency Expansion | | | | | | | | | |
| Will general acu | tr care services and bed | Is will be relocated to a new or | retrofittrd building | j ? | | | | | |
| Emergency | Emergency Relocated to new building | | | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Build | ling Bed Count | | | | |
| N_2-27 - Tower 2 | | | | | | | | | |
| | | | | | | | | | |
| Building Number: | 12 Buildir | ng Name: Dining Area Addition | on | | | | | | |
| Will general acu | tr care services and bed | Is will be relocated to a new or | retrofittrd building | j ? | | | | | |
| Support Services | Relocated to ne | w building | | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Build | ling Bed Count | | | | |
| N_3-28 - Tower 3 | | | | | | | | | |
| | | | | | _ | | | | |
| Building Number: | 13 Buildir | ng Name: Mericos Building | | | | | | | |
| Will general acu | tr care services and bed | Is will be relocated to a new or | retrofittrd building | j ? | | | | | |
| Radiological/Ima | Relocated to ne | w building | | | | | | | |
| New Building | Bed Count | RetroFitted Building | Bed Count | Other SPC2-SPC5 Build | ling Bed Count | | | | |
| N_2-27 - Tower 2 | | | | | | | | | |
| | | | | | | | | | |

| Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
| Compart Compart | | | | | | | | | |
| Support Services Relocated to new building | Support Services Relocated to new building | | | | | | | | |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count | | | | | | | | | |
| N_2-27 - Tower 2 | | | | | | | | | |
| | | | | | | | | | |
| Building Number: Mericos Building Number: Mericos Building Number: | | | | | | | | | |
| Will general acutr care services and beds will be relocated to a new or retrofittrd building? | | | | | | | | | |
| OutpatientSurgery Relocated to new building | | | | | | | | | |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count | | | | | | | | | |
| N_2-27 - Tower 2 | | | | | | | | | |
| | | | | | | | | | |
| Building Number: Outpatient Waiting Room | | | | | | | | | |
| Will general acutr care services and beds will be relocated to a new or retrofittrd building? | | | | | | | | | |
| Support Services Relocated to new building | | | | | | | | | |
| New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count | | | | | | | | | |
| N_2-27 - Tower 2 | | | | | | | | | |
| | | | | | | | | | |

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:52 of 90

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 01-3-4 | Building Name: | Building 1-3-4 | | | |
|------------------|------------------------|----------------|--------------------------|----------------------|---|-----------------------|
| Type of Service | e Provided | I D | X Surgical | X Obstetrical | Х | Rehabilitation |
| | Nursing | | | Cesarean/Deliv | | Therapy |
| | IntensiveCare | | X Anesthesia | Obstetrical Recovery | | Renal Dialysis |
| X | Pediatric/Adol escent | | Clinical Lab | Newborn/ | X | Outpatient Surgery |
| | Psychiatric Nursing | <u> </u> | Radiological/ Imaging | WellBaby | | |
| | Obstetrical | | Pharmaceutical | Emergency | | Central Plant |
| Ш | Ante/Postprtun | n D | X Dietetic | Nuclear Medicine | | Support Services |
| | Intermediate Care | | Administration | | | |
| | Skilled Nursing | , | | | | |

Report Year: 2010 12363 Scripps Memorial Hospital - La Jolla La Jolla Page:53 of 90

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 02 | Building Name: | Wes | t Tower | | | | | |
|--------------------------|------------------------------|----------------|-----------------|-------------------------|---------------|-------------------------------|---|---------------------------|--|
| Type of Service Provided | | | | | | | | | |
| | | | s | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | |
| X | Nursing | | | Anesthesia | | | | | |
| X | IntensiveCare | _ | _ | | X | Obstetrical Recovery | | Renal Dialysis | |
| | Pediatric/Adol | , <u> </u> | | Clinical Lab | $\overline{}$ | | | Outpatient | |
| | | | | Radiological/ maging | X | Newborn/ WellBaby | | Surgery | |
| Ш | Psychiatric Nursing | | _ | Pharmaceutical | | Emergency | | Central Plant | |
| X | Obstetrical Ante/Postprtu | m | | Dietetic | | Nuclear Medicine | X | Support Services | |
| | Intermediate Care | | _] <i>,</i> | Administration | | | | | |
| | Skilled Nursin | g | | | | | | | |

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 05 | Building Name: | Transition Tower (& 5A) | | | |
|------------------|------------------------------|----------------|---------------------------------|----------------------------|---|---------------------------|
| Type of Service | e Provided | | | | | |
| | | | Surgical | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | Nursing | | Anesthesia | | | |
| | IntensiveCare | • | | Obstetrical Recovery | | Renal Dialysis |
| | Pediatric/Adol | , [| Clinical Lab | | | Outpatient |
| | escent | | Radiological/ | Newborn/ WellBaby | | Surgery |
| | Psychiatric Nursing | | Imaging Pharmaceutical | Emergency | | Central Plant |
| | | | Pharmaceutical | Lineigency | Ш | Central Plant |
| Ш | Obstetrical Ante/Postprtu | m _ | Dietetic | Nuclear Medicine | X | Support Services |
| | Intermediate Care | | A desiminate de la constitución | | | |
| П | Skilled Nursin | g L | Administration | | | |

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 06 | Building Name: | East Tower | | | |
|------------------|------------------------|----------------|--------------------------|-------------------------------|---|---------------------------|
| Type of Service | e Provided | | | | | |
| | | | Surgical | Obstetrical Cesarean/Deliv | X | Rehabilitation Therapy |
| X | Nursing | | Anesthesia | | | |
| | IntensiveCare | · | _ | Obstetrical Recovery | | Renal Dialysis |
| | Pediatric/Ado | , [| Clinical Lab | | | Outpatient |
| | escent | | Radiological/ Imaging | Newborn/ WellBaby | | Surgery |
| | Psychiatric Nursing | X | _ | Emergency | | Central Plant |
| X | Obstetrical | | | X Nuclear | X | Support |
| | Ante/Postprtu | | Dietetic | Medicine | | Services |
| | Intermediate | | _ | | | |
| | Care | <u> </u> | Administration | | | |
| | Skilled Nursin | g | | | | |

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 07 | Building Name: | Building 7 | | | |
|------------------|-------------------------------|----------------|--------------------------|----------------------------|---|---------------------------|
| Type of Service | e Provided | | | | | |
| | | | Surgical | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | Nursing | | Anesthesia | | | |
| | IntensiveCare | · | | Obstetrical Recovery | | Renal Dialysis |
| | Pediatric/Adol escent | <u> </u> | X Clinical Lab | | | Outpatient |
| | | | Radiological/ Imaging | Newborn/ WellBaby | | Surgery |
| | Psychiatric Nursing | | Pharmaceutical | Emergency | | Central Plant |
| | Obstetrical Ante/Postprtui | m | | Nuclear | Х | Support |
| | Anten Ostpitui | ''' [| Dietetic | Medicine | | Services |
| | Intermediate Care | | ¬ | | | |
| | | | Administration | | | |
| | Skilled Nursin | g | | | | |

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|--------------|------|-------|--------------------------------------|----------|---------------|

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

| Building Number: | 08 | Building Name: | Service Building | g (8, 8A, 8B) | | |
|------------------|------------------------------|----------------|------------------------|-----------------|-----------------------|---------------------------|
| Type of Servic | e Provided | | | | | |
| | | | Surgical | Obste Cesar | etrical rean/Deliv | Rehabilitation Therapy |
| | Nursing | | Anesthesia | | | Danal Biakaia |
| | IntensiveCare | , | | Obste Recov | | Renal Dialysis |
| | Pediatric/Adol | , L | Clinical Lab | ☐ Newb | orn/ | Outpatient Surgery |
| | Psychiatric | | Radiologica Imaging | 1 1 | | 3 |
| | Nursing | | Pharmaceu | tical Emerç | gency | Central Plant |
| | Obstetrical Ante/Postprtu | m [| Dietetic | Nuclea Medic | | Support Services |
| | Intermediate Care | | Administrati | ion | | |
| | Skilled Nursin | ıg | | | | |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Numbe | er: 01-3-4 | Building Na | me: Building 1-3-4 | | | | |
|-----------------|-------------------------------|---------------|--------------------------|-----------|-------------------------------|---|---------------------------|
| Configuration : | Retrofit Non-Confo | orming buildi | ng to SPC 2 and NPC 3 | 3 and rem | ove from service by 2030 | | |
| Type of Serv | rice Provided | | | | | | |
| | Nursing | X | Surgical | X | Obstetrical Cesarean/Deliv | X | Rehabilitation Therapy |
| | IntensiveCare | X | Anesthesia | | Obstetrical | | Renal Dialysis |
| X | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | X | Radiological/ Imaging | | Newborn/ WellBaby | X | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | Intermediate | X | Dietetic | | | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | | Support Services |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Numbe | er: 01A | Building Nar | me: Building 1-A | | | |
|----------------|-------------------------------|----------------|--------------------------|---------|-------------------------------|---------------------------|
| Configuration: | Retrofit Non-Confo | orming buildir | ng to SPC 2 and NPC 3 | and rem | ove from service by 2030 | |
| Type of Serv | vice Provided | | | | | |
| | Nursing | X | Surgical | | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | |
| | Psychiatric Nursing | X | Radiological/ Imaging | | Newborn/ WellBaby | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | Central Plant |
| | Intermediate | | Dietetic | | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | Support Services |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Number | Building Number: 02 Building Name: West Tower | | | | | | | | |
|-----------------|---|--------------|--------------------------|---------|-------------------------------|---|---------------------------|--|--|
| Configuration : | Retrofit Non-Confo | rming buildi | ng to SPC 2 and NPC 3 | and rem | ove from service by 2030 | | | | |
| Type of Serv | ice Provided | | | | | | | | |
| X | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | |
| X | IntensiveCare | | Anesthesia | X | Obstetrical | | Renal Dialysis | | |
| | Pediatric/Adol escent | X | Clinical Lab | | Recovery | | | | |
| | Psychiatric Nursing | | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery | | |
| 1,, 1 | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant | | |
| | Intermediate | | Dietetic | | | | | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | X | Support Services | | |

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|--------------|------|-------|--------------------------------------|----|---------|---------------|

| Building Number: | Building Number: 05 Building Name: Transition Tower (& 5A) | | | | | | | | |
|------------------|--|---------------|--------------------------|-----------|-------------------------------|---|---------------------------|--|--|
| Configuration: | Retrofit Non-Confo | orming buildi | ng to SPC 2 and NPC | 3 and rem | ove from service by 2030 | | | | |
| Type of Servic | e Provided | | | | | | | | |
| N | ursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | |
| In | ntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis | | |
| | ediatric/Adol scent | | Clinical Lab | | Recovery | | | | |
| | sychiatric ursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery | | |
| _ | bstetrical nte/Postprtum | | Pharmaceutical | | _ | | 0 | | |
| | ntermediate | | Dietetic | | Emergency | | Central Plant | | |
| | are | | | | Nuclear Medicine | X | Support Services | | |
| ☐ s | killed Nursing | | Administration | | | | 23000 | | |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Number | er: 06 | Building Na | me: East Tower | | | | |
|-----------------|-------------------------------|---------------|--------------------------|-----------|-------------------------------|---|---------------------------|
| Configuration : | Retrofit Non-Confo | orming buildi | ng to SPC 2 and NPC | 3 and rem | ove from service by 2030 | | |
| Type of Serv | vice Provided | | | | | | |
| X | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | X | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| X | Obstetrical Ante/Postprtum | X | Pharmaceutical | П | Emergency | | Central Plant |
| | Intermediate Care | | Dietetic | X | Nuclear Medicine | X | Support |
| | Skilled Nursing | X | Administration | | Nucidal Medicilie | | Services |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Type of Service Provided Nursing Nursing Nursing Anesthesia Obstetrical Renal Dialysis Pediatric/Adol escent Psychiatric Nursing Radiological/ Imaging Pharmaceutical Ante/Postprtum Intermediate Care Nuclear Medicine X Surgical Obstetrical Recovery Rehabilitation Therapy Rehabilitation Therapy Renal Dialysis Renal Dialysis Renal Dialysis Remai Dialysis Surgery Newborn/ WellBaby Surgery Central Plant Dietetic Nuclear Medicine X Support Services | Building Number: | 06A | Building Nar | ne: Building 6A | | | | |
|---|------------------|---------------------|--------------|----------------------|-----|------------------|---|----------------|
| Nursing X Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol Recovery Renal Dialysis Psychiatric Nursing Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Pharmaceutical Emergency Central Plant Intermediate Care Nuclear Medicine X Support Services | Configuration : | Replace with new | SPC 5 and N | IPC 4 or NPC 5 build | ing | | | |
| IntensiveCare | Type of Service | Provided | | | | | | |
| Pediatric/Adol escent | Nu | rsing | X | Surgical | | | | |
| Pediatric/Adol escent | Into | ensiveCare | | Anesthesia | | | | Renal Dialysis |
| Psychiatric Nursing | I I | | | Clinical Lab | | Recovery | | |
| Obstetrical Ante/Postprtum Intermediate Care Dietetic Nuclear Medicine X Support Services | | | | | | | | |
| Intermediate Care Dietetic Nuclear Medicine X Support Services | 1 1 - | | | Pharmaceutical | | Emergency | | Central Plant |
| X Administration | Into | ermediate | | Dietetic | | Lineigency | | Contrait lant |
| I I Chille al Munaine a I = | | re illed Nursing | X | Administration | | Nuclear Medicine | X | |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Number: | 07 | Building Na | me: Building 7 | | | | |
|------------------|-----------------------------|----------------|--------------------------|-----------|-------------------------------|---|---------------------------|
| Configuration: | Retrofit Non-Confo | orming buildir | ng to SPC 2 and NPC | 3 and rem | ove from service by 2030 | | |
| Type of Service | Provided | | | | | | |
| Nu | ursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| Int | tensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | ediatric/Adol cent | X | Clinical Lab | | Recovery | | |
| | sychiatric ursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | ostetrical nte/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | termediate | | Dietetic | | | | |
| | are killed Nursing | | Administration | | Nuclear Medicine | X | Support Services |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Numbe | r: 08 | Building Nar | me: Service Building (8 | 3, 8A, 8E | 3) | | |
|-----------------|-------------------------------|---------------|--------------------------|-----------|-------------------------------|---|---------------------------|
| Configuration : | Retrofit Non-Confo | rming buildir | ng to SPC 2 and NPC 3 | and rem | ove from service by 2030 | | |
| Type of Serv | ice Provided | | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| I I | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | П | Emergency | X | Central Plant |
| | Intermediate Care | | Dietetic | | | | 0 |
| | Skilled Nursing | | Administration | | Nuclear Medicine | | Support Services |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Number: | 09 | Building Na | me: Co-Generation | Plant | | | |
|------------------|------------------------------|-------------|--------------------------|-------|-------------------------------|---|---------------------------|
| Configuration : | Replace with new | SPC 5 and N | NPC 4 or NPC 5 build | ing | | | |
| Type of Servic | e Provided | | | | | | |
| N | lursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| Ir | ntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | ediatric/Adol scent | | Clinical Lab | | Recovery | | |
| | sychiatric lursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | Obstetrical nte/Postprtum | | Pharmaceutical | | E | | Ocatal Black |
| | ntermediate | | Dietetic | | Emergency | X | Central Plant |
| | care | | | | Nuclear Medicine | | Support Services |
| S | killed Nursing | | Administration | | | | |

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|--------------|------|-------|--------------------------------------|----------|---------------|

| Building Number | er: 10 | Building Na | me: Building 10 | | | | |
|-----------------|-------------------------------|-------------|--------------------------|-----|-------------------------------|---|---------------------------|
| Configuration : | Replace with new | SPC 5 and I | NPC 4 or NPC 5 build | ing | | | |
| Type of Serv | vice Provided | | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| X | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | Intermediate | | Dietetic | _ | Linergency | | Contain and |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | X | Support Services |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Number | r: 10A | Building Nar | me: Building 10A | | | | |
|-----------------|-------------------------------|--------------|--------------------------|---|-------------------------------|---|---------------------------|
| Configuration: | Replace with new | SPC 5 and N | IPC 4 or NPC 5 building | I | | | |
| Type of Serv | ice Provided | | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | Intermediate | | Dietetic | | | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | X | Support Services |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Numbe | r: 11 | Building Nai | me: Emergency Expan | sion | | |
|-----------------|-------------------------------|--------------|--------------------------|------|-------------------------------|---------------------------|
| Configuration : | Replace with new | SPC 5 and N | IPC 4 or NPC 5 building | | | |
| Type of Serv | ice Provided | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | Renal Dialysis |
| I I | Pediatric/Adol escent | | Clinical Lab | | Recovery | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | X | Emergency | Central Plant |
| | Intermediate Care | | Dietetic | | | |
| | Skilled Nursing | X | Administration | | Nuclear Medicine | Support Services |

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| Building Numbe | er: 12 | Building Na | me: Dining Area Additi | on | | | |
|-----------------|-------------------------------|-------------|--------------------------|----|-------------------------------|---|---------------------------|
| Configuration : | Replace with new | SPC 5 and N | NPC 4 or NPC 5 building | l | | | |
| Type of Serv | rice Provided | | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | Intermediate | | Dietetic | | | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | X | Support Services |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Number: 13 Building Name: Mericos Building | | | | | | | | | | | |
|---|----------------------------|-----------------------------------|--------------------------|--|-------------------------------|---|---------------------------|--|--|--|--|
| Configuration: | Replace with new | SPC 5 and NPC 4 or NPC 5 building | | | | | | | | | |
| Type of Service Provided | | | | | | | | | | | |
| Nu | rsing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | | | |
| Inte | ensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis | | | | |
| | diatric/Adol cent | | Clinical Lab | | Recovery | | | | | | |
| | ychiatric rsing | X | Radiological/ Imaging | | Newborn/ WellBaby | X | Outpatient Surgery | | | | |
| | estetrical te/Postprtum | | Pharmaceutical | | Emergency | | Central Plant | | | | |
| | ermediate | | Dietetic | | Lineigonoy | | OSMAT TAIR | | | | |
| Ca | re illed Nursing | | Administration | | Nuclear Medicine | X | Support Services | | | | |

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

| Building Number: 13A Building Name: Outpatient Waiting Room | | | | | | | | | |
|--|-------------------------------|--|--------------------------|--|-------------------------------|---|---------------------------|--|--|
| Configuration Replace with new SPC 5 and NPC 4 or NPC 5 building | | | | | | | | | |
| Type of Service Provided | | | | | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | |
| | IntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis | | |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | | | | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery | | |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | | Emergency | | Central Plant | | |
| | Intermediate | | Dietetic | | Emergency | | Central Flam | | |
| | Care Skilled Nursing | | Administration | | Nuclear Medicine | X | Support Services | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Building Number: 01/ | | | | | | |
|-----------------------------|-------------------|---|---|--------------------------|----------------------------|------------------------|
| Type of Service Prov | <u>vided</u> | | | | | |
| Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| IntensiveCare | Inpatient Beds | 0 | | Anesthesia | | |
| Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis |
| Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant |
| Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | Support Services |
| Skilled Nursing | Inpatient Beds | 0 | | Administration | | |
| Total Beds this Building | | 0 | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Building Number: 06/ | | | | | | |
|-----------------------------|-------------------|---|---|--------------------------|----------------------------|------------------------|
| Type of Service Prov | <u>/ided</u> | | | | | |
| Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| IntensiveCare | Inpatient Beds | 0 | | Anesthesia | | |
| Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis |
| Psychiatric Nursing | Inpatient Beds | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant |
| Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | X Support Services |
| Skilled Nursing | Inpatient Beds | 0 | X | Administration | | |
| Total Beds this Building | | 0 | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Building Number: 09 | | | | | | | | |
|-----------------------------|-------------------|---|--------------------------|----------------------------|------------------------|--|--|--|
| Type of Service Provided | | | | | | | | |
| Nursing | Inpatient Beds | 0 | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | | |
| IntensiveCare | Inpatient Beds | 0 | Anesthesia | | | | | |
| Pediatric/Adol escent | Inpatient Beds | 0 | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | | |
| Psychiatric Nursing | Inpatient Beds | 0 | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 | Pharmaceutical | Emergency | X Central Plant | | | |
| Intermediate Care | Inpatient Beds | 0 | Dietetic | Nuclear Medicine | Support Services | | | |
| Skilled Nursing | Inpatient Beds | 0 | Administration | | | | | |
| Total Beds this Building | | 0 | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Buildi | ing Number: 10 | | | | | | | | |
|--------|-------------------------------|-------------------|----|--|--------------------------|----------------------------|------------------------|--|--|
| Тур | Type of Service Provided | | | | | | | | |
| | Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| X | IntensiveCare | Inpatient Beds | 30 | | Anesthesia | | | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| | Psychiatric Nursing | Inpatient Beds | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | |
| | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant | | |
| | Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | X Support Services | | |
| | Skilled Nursing | Inpatient Beds | 0 | | Administration | | | | |
| | Total Beds this Building | | 30 | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Buildi | | | | | | | | | |
|--------|-------------------------------|-------------------|---|--|--------------------------|----------------------------|------------------------|--|--|
| Туре | Type of Service Provided | | | | | | | | |
| | Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| | IntensiveCare | Inpatient Beds | 0 | | Anesthesia | | | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| | Psychiatric Nursing | Inpatient Beds | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | |
| | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant | | |
| | Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | X Support Services | | |
| | Skilled Nursing | Inpatient Beds | 0 | | Administration | | | | |
| | Total Beds this Building | | 0 | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Building Number: |] | | | | | | | | |
|------------------------|---------------------------|---|---|--------------------------|----------------------------|------------------------|--|--|--|
| Type of Service | Type of Service Provided | | | | | | | | |
| Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | | |
| IntensiveCa | are Inpatient Beds | 0 | | Anesthesia | | | | | |
| Pediatric/A | dol Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | | |
| Psychiatric Nursing | | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | | |
| Obstetrical Ante/Postp | Inpatient rtum Beds | 0 | | Pharmaceutical | X Emergency | Central Plant | | | |
| Intermediat Care | e Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | Support Services | | | |
| Skilled Nurs | sing Inpatient Beds | 0 | X | Administration | | | | | |
| Total Beds Building | this | 0 | | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Building Number: 12 | | | | | | | | |
|-----------------------------|-------------------|---|--------------------------|----------------------------|------------------------|--|--|--|
| Type of Service Provided | | | | | | | | |
| Nursing | Inpatient Beds | 0 | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | | |
| IntensiveCare | Inpatient Beds | 0 | Anesthesia | | | | | |
| Pediatric/Adol escent | Inpatient Beds | 0 | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | | |
| Psychiatric Nursing | Inpatient Beds | 0 | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | | |
| Obstetrical Ante/Postprtum | Inpatient Beds | 0 | Pharmaceutical | Emergency | Central Plant | | | |
| Intermediate Care | Inpatient Beds | 0 | Dietetic | Nuclear Medicine | X Support Services | | | |
| Skilled Nursing | Inpatient Beds | 0 | Administration | | | | | |
| Total Beds this Building | | 0 | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Build | ing Number: 13 | | | | | | | | |
|-------|-------------------------------|-------------------|---|---|--------------------------|----------------------------|-------------------------|--|--|
| Тур | Type of Service Provided | | | | | | | | |
| | Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| | IntensiveCare | Inpatient Beds | 0 | | Anesthesia | | | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| | Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | Newborn/ WellBaby | X Outpatient Surgery | | |
| | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant | | |
| | Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | X Support Services | | |
| | Skilled Nursing | Inpatient Beds | 0 | | Administration | | | | |
| | Total Beds this Building | | 0 | | | | | | |

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

| Buildir | ng Number: 13A | | | | | | | | |
|---------|-------------------------------|-------------------|---|--|--------------------------|----------------------------|------------------------|--|--|
| Type | Type of Service Provided | | | | | | | | |
| | Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| | IntensiveCare | Inpatient Beds | 0 | | Anesthesia | | | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| | Psychiatric Nursing | Inpatient Beds | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | |
| | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant | | |
| | Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | X Support Services | | |
| | Skilled Nursing | Inpatient Beds | 0 | | Administration | | | | |
| | Total Beds this Building | | 0 | | | | | | |

Report Status: **Data Last Update:** 01/19/2011 **Submission Date:** 01/19/2011 **Print Date:** 1/20/2011 8:38 AM

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| Building Number: 0 | 1A Build | ing Name: Build | ling 1-A | | | |
|-------------------------|------------------|-------------------------------|---------------------|---|--|--|
| Medical / Surgical (Inc | lude GYN) | Acute Respiratory | Care | Acute Psychiatric | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | |
| Perinatal (excluse New | vborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | | |
| Inpatient 0 | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | nent | |
| Inpatient 0 | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | 0 | 0 | |

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| Building Number: | 6A Build | ing Name: Build | ling 6A | | | |
|-------------------------|------------------|-------------------------------|---------------------|---|--|--|
| Medical / Surgical (Inc | lude GYN) | Acute Respiratory | Care | Acute Psychiatric | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | |
| Perinatal (excluse Nev | vborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop | nent | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | 0 | 0 | |

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| Building Number: |)9 Build | ing Name: Co-C | Generation Plant | | | |
|-------------------------|---------------------|-------------------------------|---------------------|---|--|--|
| Medical / Surgical (Inc | clude GYN) | Acute Respiratory | Care | Acute Psychiatric | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Perinatal (excluse Ne | wborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care New Nursery | vborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | nent | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 | |

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| Building Number: 1 | 0 Build | ing Name: Build | ling 10 | | |
|-----------------------------------|------------------------|-------------------------------|---------------------|---|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop | ment |
| Inpatient 18 Bed | Inpatient 5728 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 12 Bed | Inpatient 3819 Days | Inpatient 0 Bed | Inpatient 0 | 30 | 30 |

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| Building Number: 1 | 0A Build | ing Name: Build | ing 10A | | |
|-----------------------------------|---------------------|-------------------------------|---------------------|---|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nev Nursery | vborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | ment |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 |

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| Building Number: 1 | 1 Buildi | ing Name: Eme | rgency Expansion | | |
|-----------------------------------|---------------------|-----------------------------------|---------------------|---|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days |
| Pediatric | | intensive Care Newborn Nursery | | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / development Disabled | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 |

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| Building Number: 1 | 2 Build | ing Name: Dini | ng Area Addition | | |
|-----------------------------------|---------------------|------------------------------|---------------------|---|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Ne Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | ment |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 |

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| Building Number: | 13 Build | ling Name: Meri | cos Building | | |
|-----------------------------------|---------------------|-------------------------------|---------------------|---|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nev Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / developn Disabled | nent |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 |

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| Building Number: 1 | 3A Build | ing Name: Outp | patient Waiting Room | | | |
|-----------------------------------|---------------------|-------------------------------|----------------------|---|--|--|
| Medical / Surgical (Include GYN) | | Acute Respiratory Care | | Acute Psychiatric | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Perinatal (excluse Newborn / GYN) | | Burn | Burn | | Skilled Nursing | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Pediatric | | intensive Care New Nursery | wborn | Intermediate Card | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop | nent | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 | Inpatient 0 Bed | Inpatient 0 Days | |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | 0 | 0 | |